PTO/SB/06 (07-06)

Approved for use through 1/31/2007. CMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/076,013			ing Date 13/2002	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)									ENTITY 🛛	OTHER THAN OR SMALL ENTITY			
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		ı	N/A		1	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		l	N/A		1	N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A	4		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	minus 3 = *			l	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.18(s))	FEE sh	If the specification and drawing sheets of paper, the applicatio is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (n size fee due for each i thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL		
										ER THAN ALL ENTITY			
AMENDMENT	02/21/2008	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	• 41	Minus	·· 25		= 16		X \$25 =	400	OR	x s =		
	Independent (37 CFR 1.16(h))	• 24	Minus	···16		= 8	l	X \$105 =	840	OR	x s =		
Ž	Application Size Fee (37 CFR 1.16(s))						ı						
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						l			OR			
								TOTAL ADD'L FEE	1240	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus					x \$ =		OR	x \$ =		
Δ	Independent (37 CFR 1.16(h))		Minus	***				x \$ =		OR	x \$ =		
ᇳ	Application Size Fee (37 CFR 1.16(s))]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
										OR	TOTAL ADD'L FEE		
** 11	" if the entry in column 1 is less than the entry in column 2, write "0" in column 3. " if the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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